



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of  
Donde

Group Art Unit: Not yet assigned

Serial No: not yet assigned

Filed: February 4, 2004

Examiner: Not yet assigned

For: **10,10-DIALKYL PROSTANOIC ACID  
DERIVATIVES AS AGENTS FOR  
LOWERING INTRAOCULAR PRESSURE**

**PRELIMINARY AMENDMENT**

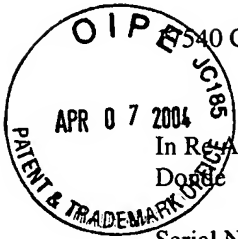
Mail Stop: Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

The following preliminary amendment is submitted for the subject application.

H-09-04

*Spw*



540 CIP1 (AP)

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Dongle

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For: **10,10-DIALKYL PROSTANOIC ACID  
DERIVATIVES AS AGENTS FOR LOWERING  
INTRAOCULAR PRESSURE**

*10/772,720*

Group Art Unit: Not yet assigned

Examiner: Not yet assigned

**TRANSMITTAL SHEET**

Mail Stop: Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a preliminary amendment and reply in the above-identified application. Enclosed are:

- 1) Transmittal Sheet – (2 pgs.)
- 2) Amendment and Reply (12 pgs.)
- 3) Return/Stamped Postcard

**CERTIFICATE OF EXPRESS MAIL UNDER 37 C.F.R. §1.10**

I hereby certify that this Transmittal Letter and Response and additional documents enclosed herein are being deposited with the United States Postal Service on **April 7, 2004** in an envelope as "Express Mail Post Office To Addressee" mailing label number **EV193721155US** with sufficient postage for Express Mail addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Date: April 7, 2004

Susan Bartholomew

Name of person mailing paper

*Susan Bartholomew*

Signature of person mailing paper

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DOCKET NO. 17540CIP1 (AP)  
PATENT

The fee has been calculated as shown below:

### CLAIMS AS FILED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total Claims	28	28	= 0 ×	\$18	= \$0.00
Independent Claims	03	3	= 0 ×	\$86	= \$0.00
If application has been amended to contain multiple dependent claim(s), then add			No	\$290	= \$0.00
Time Extension Fees:					= \$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

( x ) The Commissioner is hereby authorized to charge fees under 37 CFR 1.16 and 1.17 (associated with petition fees or excess claim fees) which may be required, or credit any overpayment to Deposit Account No. 01-0885. A duplicate copy of this sheet is enclosed.

Date: April 7, 2004

Brent A. Johnson (T2-7H)  
Allergan, Inc.  
2525 Dupont Drive  
Irvine, CA 92612

Respectfully submitted,

Brent A. Johnson  
Registration No. 51,851  
Agent of Record  
Telephone: 714/246-4348  
Telecopier: 714/246-4249